## PART B - FEE(S) TRANSMITTAL

this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents

| RADEMARKS  |  |   | or <u>Fax</u>  | P.O. Box 1450<br>Alexandria, Vir<br>(703) 746-4000   | ginia 22313-1450  |   |
|--|--|---|--|--|---|---|
| INSTRUCTIONS: This for<br>appropriate. All further cor<br>indicated unless corrected &<br>maintenance fee notification | rm should be used for tran<br>respondence including the<br>below or directed otherwise<br>is.    | smitting the ISSL<br>Patent, advance or<br>in Block 1, by (a      |  |  | uired). Blocks 1 through 5 will be mailed to the current s; und/or (b) indicating a sep   | should be completed where<br>correspondence address as<br>arate "FEE ADDRESS" for                                 |
| CURRENT CURRESPONDENC  | E ADDRESS (Note: Use Block 1 for   | any change of address)  |  | Fee(s) Transmittel. T<br>papers. Each addition   | If mailing can only be used f<br>his certificate cannot be used of<br>the paper, such as an assignment<br>the of mailing or transmission.   | for any other accompanying  |
| James G. O'Neill<br>Klein, O'Neill & Si<br>Suite 510<br>2 Park Plaza   | ingh, LLP  |   |  | Co<br>I hereby certify that the<br>States Postal Service<br>addressed to the Matransmitted to the US.              | ertificate of Mailing or Tran<br>this fee(s) Transmittal is bein<br>with sufficient postage for fir<br>all Stop ISSUR FRE address<br>PTO (703) 746-4000, on the                                 | smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below. |
| Irvine, CA 92614   |  |   |  |  |   | (Depositor's name)  |
|  |  |   | •  |  |   | (Signature)   |
|  |  |   |  |  |   | (Date)  |
| APPLICATION NO.  | FILING DATE  |   | FIRST NAMED INV  | ENTOR  | ATTORNEY DOCKET NO.   | CONFIRMATION NO.  |
| 10/624,008   | 07/21/2003   |   | Richard Quint  | ana  | 743-03-PA-J   | 5718  |
| TITLE OF INVENTION: TO   | DILET CONTROL SYSTEM   | v <b>í</b>  | 1  | 12/06/2004 GWDR  | DDF2 00000043 1062400   | 8   |
|  |  |   |  | 01 FC:2501   | 68  | 5.00 OP   |
| APPLN. TYPE  | SMALL ENTITY   | ISSUE FI  | E  | PUBLICATION FEE  | TOTAL FEE(S) DUE  | DATE DUE  |
| nonprovisional   | YES  | \$685   |  | \$0  | \$685   | . 01/18/2005  |
| EXAM   | INER   | ART UN  | IT .   | CLASS-SUBCLASS   | 7   |   |
| HUYNH,   | KHOA D   | 3751  |  | 004-427000   |   |   |
| "Fee Address" indicate PTO/SB/47; Roy 03-02 o Number is required.  3. ASSIGNEE NAME AND                                |  | tion form<br>of a Customer<br>E PRINTED ON T                      | or agents OR, al<br>(2) the name of<br>registered attorn<br>2 registered pate<br>listed, no name | a single firm (having as<br>ley or agent) and the nament attorneys or agents. It<br>will be printed,<br>t or type) | eill & Singh, a member a mes of up to fno nume is 3   |   |
| (A) NAME OF ASSIGNE  |  | (B)   | RESIDENCE: (C  | ITY and STATE OR CO  | ountry) ach, Californi  |   |
| Please check the appropriate   | assignee category or categor   | ries (will not be pri   | nted on the patent)  | : 🗖 Individual 🖼 C   | orporation or other private gre   | oup entity Government   |
| 4a. The following fee(s) are e   | mclased;   |   | Payment of Fcc(s)  |  |   |   |
| lssue Fee  Publication Fee (No se  | nall entity discount permitte  |   | _  | amount of the fee(s) is endit card. Form PTO-203   |   |   |
|  | Copies   | •   |  | s hereby authorized by o   | charge the required fee(s), or  | credit any overpayment, to  |
| 5. Change in Entity Status (   | from status indicated above  | )   | Deboar Accodist  | umber  | (enclose an extra c   | opy of this form).  |
|  | AALL ENTITY status. Sec 3  |   |  |  | LL ENTITY status. See 37 C  |   |
| The Director of the USPTO;<br>NOTE: The Issue Fee and Pu<br>interest as shown by the recon                             | s requested to apply the Issu<br>oblication Fee (if required) w<br>rds of the United States Pate | e Fee and Publicati<br>fill not be accepted<br>nt and Trademurk ( | on Fee (if any) or the from anyone other Office.   | o re-apply any previous<br>than the applicant; a reg   | ly paid issue fee to the applica<br>astered attorney or agent; or the   | tion identified above.<br>te assignee or other party in   |
| Authorized Signature   | 0  | onsell  |  | Date   | 12/1/04   |   |
| Typed or printed name  | VJames G O'1   | Veill   |  | Registration   | 22,858  | ·   |
|  |  |   |  |  | the public which is to file (and<br>minutes to complete, includin<br>numents on the amount of the<br>Trademark Office, U.S. Deps<br>S. SEND TO: Commissioner of<br>displays a valid OMB control |   |
| ***************************************  | <u>-</u>   |   |  |  |   | ·   |

PTOL-85 (Rev. 09/04) Approved for use through 04/30/2007.

DEC-0333004 16:49

| TLET CONTROL SYSTEM  Pereby certify that this  1 Page issue fee transmittal and 1 page PTO-2038  (Identify type of correspondence)  being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703 746 4000  |                            | RANSMISSION BY FAC<br>ntana, Devon D. Niccole | CSIMILE (37 CFR 1.8)                 | Docket No.<br>743-03-PA-J |
|--|----------------------------|---|--------------------------------------|---------------------------|
| nereby certify that this  1 Page issue fee transmittal and 1 page PTO-2038 (Identify type of correspondence) being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703 746 4000  12/02/04 (Date)  Richa Dhindsa (Typed or Printed Name of Person Signing Certificate) (Signature) |                            |   |                                      | Group Art Unit            |
| (Identify type of correspondence)  s being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703 746 4000  n 12/02/04  (Date)  Richa Dhindsa  (Typed or Printed Name of Person Signing Certificate)  (Signature)  | vention:                   |   |                                      |                           |
| (Identify type of correspondence) s being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703 746 4000  In 12/03/04  (Date)  Richa Dhindsa  (Typed or Printed Name of Person Signing Certificate)  (Signature)  | DILET CONTROL SYSTI        | G <b>M</b>                                    |                                      |                           |
| (Identify type of correspondence)  being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703 746 4000  12/03/04  (Date)  Richa Dhindsa  (Typed or Printed Name of Person Signing Certificate)  (Signature)  |                            |   |                                      |                           |
| (Identify type of correspondence) s being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703 746 4000  In 12/03/04  (Date)  Richa Dhindsa  (Typed or Printed Name of Person Signing Certificate)  (Signature)  |                            |   |                                      |                           |
| Seeing facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703 746 4000  12/02/04  (Date)  Richa Dhindsa  (Typed or Printed Name of Person Signing Certificate)  (Signature)  | hereby certify that this   | 1 Page is                                     | sue fee transmittal and 1 page PTO-  | 2038                      |
| Richa Dhindsa  (Typed or Printed Name of Person Signing Certificate)  (Signature)  | s being facsimile transmit | ted to the United States Pater                |                                      | 703 746 4000              |
| Richa Dhindsa  (Typed or Printed Name of Person Signing Certificate)  (Signature)  | . 0                        |   |                                      |                           |
| (Typed or Printed Name of Person Signing Certificate)  |                            | <u> </u>                                      |                                      |                           |
| (Typed or Printed Name of Person Signing Certificate)  |                            |   |                                      |                           |
| (Typed or Printed Name of Person Signing Certificate)  Live Signature)   |                            |   | Maka Minda                           |                           |
| (Signature)  |                            |   | (Typed or Printed Name of Person S   | a<br>igning Certificate)  |
| (Signature)  |                            | ,   | lile De                              | winds a                   |
| Note: Each paper must have its own certificate of mailing.   |                            | enada? *                                      | (Signature)                          |                           |
| Note: Each paper must have its own certificate of mailing.   |                            |   |                                      |                           |
| Note: Each paper must have its own certificate of mailing.   |                            |   |                                      |                           |
| Note: Each paper must have its own certificate of mailing.   |                            |   |                                      |                           |
| Note: Each paper must have its own certificate of mailing.   | •                          |   |                                      |                           |
|  |                            | Note: Each paper must h                       | nave its own certificate of mailing. |                           |
|  |                            | ·   |                                      |                           |
|  |                            |   |                                      |                           |
| ,  |                            |   |                                      |                           |
|  |                            | ,   |                                      |                           |
|  |                            |   |                                      |                           |
|  |                            |   |                                      |                           |